Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main

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| Fill in this information to identify your case: | | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District of ILLINOIS (State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part | 1: | Identify Yourself | | |
|------|--|--|----------------------------|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your f | ull name | | |
| | | ne name that is on your | Tara | |
| | government-issued picture | First name | First name | |
| | identification (for example, your driver's license or passport). | | Nicole | |
| | | | Middle name | Middle name |
| | | | Aiello | |
| | identific | our picture cation to your meeting etrustee. | Last name | Last name |
| | | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All oth | er names you | Tara | |
| | | sed in the last 8 | First name | First name |
| | years | | Nicole | |
| | Include your married or | your married or | Middle name | Middle name |
| | Include your married or maiden names. | | Barnard | |
| | | | Last name | Last name |
| | | | Tara | |
| | | | First name | First name |
| | | | Nicole | |
| | | | Middle name | Middle name |
| | | | Cronan | |
| | | | Last name | Last name |
| 3. | Only t | he last 4 digits of | | |
| , | your S | Social Security r or federal | xxx - xx - <u>5352</u> | XXX - XX |
| | Individ | ual Taxpayer | OR | OR |
| | iuentifi | cation number | 9 xx - xx | 9xx - xx |

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Document Tara Nicole Debtor 1 Case Number (if known) Last Name

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---|---|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name Business name EIN EIN | Business name Business name EIN EIN |
| 5. Where you live | Mc Henry IL 60050 City State ZIP Code MCHENRY County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street | If Debtor 2 lives at a different address: Number Street |
| | City State ZIP Code | City State ZIP Code |
| 6. Why you are choosing this district to file for bankruptcy. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. have another reason. Explain. (See 28 U.S.C. § 1408 | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408 |

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Document Tara Nicole Debtor 1 Case Number (if known) Last Name

| Pa | Tell the Court About You | r Bankruptcy | Case | | | | | | | |
|-----|---|--|-----------------------|------------|------|---|----|--|--|--|
| 7. | The chapter of the Bankruptcy Code you | | | • | | required by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box. | | | | |
| | are choosing to file | ■ Chapter 7 | | | | | | | | |
| | under | ☐ Chapter 11 | | | | | | | | |
| | | ☐ Chapter 12 | | | | | | | | |
| | | ☐ Chap | □ Chapter 13 | | | | | | | |
| 8. | How you will pay the fee | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No | District None | | When | Case Number MM / DD / YYYY Case Number MM / DD / YYYY Case Number MM / DD / YYYY | - | | | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate? | ■ No | District | | When | Relationship to you Case Number, if known MM / DD / YYYY Relationship to you Case Number, if known MM / DD / YYYY | _ | | | |
| 11. | Do you rent your residence? | ■ No. □ Yes. | residence? No. Go to | o line 12. | | ent against you and do you want to stay in your Eviction Judgment Against You (Form 101A) and file it wi | th | | | |

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| Debto | | | cole | Aiello | ιι | Paye 4 | | Number (if kno | wn) | | |
|---|---|---|---|-----------------------------|------------|----------------|----------------|----------------|-------|----------|---|
| | First Name | Midd | lle Name | Last Name | | | | | | | |
| Pa | Report Abo | ut Any Businesse | s You Owr | as a Sole Proprietor | | | | | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a | | ■ No. Go to Part 4. ☐ Yes. Name and location of business | | | | | | | | |
| | business you opera individual, and is no separate legal entit | te as an ot a | | Name of business, if any | | | | | | | |
| a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. | | an one use a | | Number Street | | | | | | | |
| | | | | City | | | | | State | Zip Code | _ |
| | | | | Check the appropriate b | ox to des | scribe vour t | usiness: | | | | |
| | | | | ☐ Health Care Busine | | - | | (27A)) | | | |
| | | | | ☐ Single Asset Real | Estate (a | s defined in | 11 U.S.C. § 1 | 01(51B)) | | | |
| | | | | ☐ Stockbroker (as de | fined in ' | 11 U.S.C. § | 101(53A)) | | | | |
| | | | | ☐ Commodity Broker | (as defir | ned in 11 U.S | S.C. § 101(6)) | | | | |
| | | | | ☐ None of the above | | | | | | | |
| | Chapter 11 of the Bankruptcy Code are you a small if debtor? For a definition of s business debtor, se 11 U.S.C. § 101(51 | balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in | | | | | | | | | |
| 4.4 | Do you own or h | ava anv | No. | | | | | | | | |
| 14. | property that pos alleged to pose a of imminent and indentifiable haz | ses or is a threat ard to | _ | What is the hazard? | | | | | | | |
| public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or liveste that must be fed, or a build | | ny eds tion? tu own or livestock r a building | | If immediate attention is n | eeded, w | vhy is it need | led? | | | | _ |
| | that needs urgent r | epairs? | | Where is the property? | Number | Street | | | | | _ |
| | | | | | | | | | | | |

City

ZIP Code

State

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Debtor 1

Document

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Tara

Nicole

Case Number (if known)

Part 5:

Explain Your Efforts to I

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

> If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---|
| You must check one: | You must check one: |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of: | I am not required to receive a briefing about credit counseling because of: |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. rational decisions about finances.

Disability.

Incapacity. I have a mental illness or a mental

deficiency that makes me

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

incapable of realizing or making

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main

Debtor 1 Tara Nicole Document Aiello Page 6 of 60

Case Number (if known)

| Pa | rt 6: Answer These Questions | for Reporting Purposes | | |
|-----|--|--|--|--|
| 16. | What kind of debts do you have? Are you filing under Chapter 7? Do you estimate that after | as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or invention of the second of the | r consumer debts? Consumer debts are de primarily for a personal, family, or household primarily for a personal family family for a personal family family for a personal family fam | s that you incurred to obtain ss or investment. |
| | any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ■No. □Yes. | | |
| 18. | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. | How much do you estimate your assets to be worth? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Pa | rt 7: Sign Below | | | |
| For | you | e, under Chapter 7, 11,12, or 13 oter, and I choose to proceed not an attorney to help me fill out (b). ecified in this petition. or property by fraud in connection to 20 years, or both. | | |
| | | Signature of Debtor 1 Executed on05/17/2017 | 7 Execu | ture of Debtor 2 |

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Debtor 1 Tara Nicole Aiello Case Number (if known) I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to For your attorney, if you are proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under represented by one each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. if you are not represented by an attorney, you do not need to file this page. 🗶 /s/ Jason Kyle Nielson Date: 05/18/2017 Date Signature of Attorney for Debtor MM / DD / YYYY Jason Kyle Nielson Printed name Geraci Law L.L.C. Firm name 55 E. Monroe St., #3400 Number Street IL 60603 Chicago City State ZIP Code 312-332-1800 ndil@geracilaw.com Contact Phone Email address 6288458 IL

State

Bar number

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| Fill in this in | nformation to iden | tify your case: | | |
|---------------------------|----------------------|-----------------------------------|------------------------------|--|
| Debtor 1 | Tara | Nicole | Aiello | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | f <u>ILLINOIS</u> (State) | |
| Case Number (If known) | r | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Pari | Summarize Your Assets | |
|------|---|--|
| | | Your assets Value of what you own |
| | Schedule A/B: Property (Official Form 106A/B) Ia. Copy line 55, Total real estate, from Schedule A/B | <u> </u> |
| 1 | b. Copy line 62, Total personal property, from Schedule A/B | \$ 3,480 |
| 1 | Ic. Copy line 63, Total of all property on Schedule A/B | \$ 3,480 |
| | | |
| Pari | Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0 |
| | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Ba. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0 |
| 3 | Bb. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$25,207 |
| | | |
| Part | Summarize Your Liabilities | |
| | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,200.00 |
| | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$1,160.00 |
| | | |

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| Debtor 1 | Tara | Nicole | Aiello | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |

| Part 4: Answer These Questions for Administrative and Statistical Records | | | | | |
|---|----------------|--|--|--|--|
| Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes | | | | | |
| What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$ 1,72 | | | | | |
| 9. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> | Total claim | | | | |
| From Part 4 of Schedule E/F, copy the following: | | | | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_0.00 | | | | |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_0.00 | | | | |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_0.00 | | | | |
| 9d. Student loans. (Copy line 6f.) | \$_0.00 | | | | |
| 9e. Obligations arising out of a separation agreement or divorce that you did not repo priority claims. (Copy line 6g.) | rt as \$_0.00 | | | | |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | <u>\$_0.00</u> | | | | |
| 9g. Total. Add lines 9a through 9f. | \$_0.00 | | | | |

| Fill in this in | | 7 91100 Doc 1 Finitely your case and this filing: | Filod 05/10/17 | Entered 05/19/17 10:27:08 0 of 60 | Desc N | Main | |
|--|--|---|---|---------------------------------------|--------------------|---|---------|
| | Tara | Nicole | Aiello | 0 01 00 | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| | | or the : <u>NORTHERN</u> District of _ | | | | | |
| | | of the . <u>NORTHERN</u> District of _ | (State) | | Пс | heck if this is a | an |
| Case Number (If known) | | | _ | | a | mended filing | |
| Official F | orm 106A | <u>/B</u> | | | | | |
| Schedul | e A/B: Pr | operty | | | | | 12/15 |
| ategory where esponsible for ages, write you Part 1: | you think it fits supplying corre ur name and cas Describe Each Re | best. Be as complete and accur | rate as possible. If two meeded, attach a separa very question. Real Esate You Own or H | | ılly | | |
| No. Yes. Add the dol | Describe lar value of the p | portion you own for all of your e | entries fro Part 1, includi | ng any entries for pages | | | |
| you have at | tached for Part | 1. Write that number here | | > | | | \$0.00 |
| Part 2: | Describe Your Vel | hicles | | | | | |
| No. Yes. Watercraft Examples: No. Yes. Add the doll | Describe Describe, motor Boats, trailers, mot Describe Jar value of the p | homes, ATVs and other recreat ors, personal watercraft, fishing vesse portion you own for all of your e | ional vehicles, other vehicles, snowmobiles, motorcycle | accessories ng any entries for pages | | | \$ 0.00 |
| Part 3: | Describe Your Per | rsonal and Household Items | | | | | |
| | r have any legal | or equitable interest in any of th | ne following items? | | por Do r | rent value of the tion you own? not deduct secured xemptions | |
| | d goods and furr Major appliances, f Describe | nishings iurniture, linens, china, kitchenware | | | | | |
| 165. | Describe | Furniture, linens | | | \$250 | \$ | 250.00 |
| collections; | Televisions and rac electronic devices | dios; audio, video, stereo, and digital dincluding cell phones, cameras, medi | | ers, scanners; music | | | |
| Yes. | Describe | Flat screen TV, computer, printer, m | nusic collection, cell phone, g | aming system, video games. | \$680 | \$ | 680.00 |
| | Antiques and figuri | nes; paintings, prints, or other artwork | | t objects; | | | |
| Yes. | Describe | | | | | \$ | 0.00 |

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First Name

09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Yes. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Yes Describe..... 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No. Yes. Describe..... \$300 Everyday clothes, leather coats, shoes, accessories 300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Describe..... \$350 Everyday jewelry, costume jewelry, engagement rings, wedding rings 350.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list Yes. Describe..... 0.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,580.00 for Part 3. Write that number here ----**Describe Your Financial Assets** Part 4: Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No. Describe..... Yes. 0.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No. Institution name: Account Type: Yes. Describe..... Checking Account Chase 600.00 Other financial account Prepaid AmEX card 1.300.00 1,900.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No. Describe..... Institution or issuer name: 0.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in Describe..... Name of Entity and Percent of Ownership: 0.00

Case 17-81199 Doc 1 Tara Debtor 1

First Name Middle Name

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|-----------------------|---|
| | |
| Document Last Name | |
| Last Name | |

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| 20. | Governme | nt and corporate | e bonds and other negotiable and non-negotiable instruments | | |
|-----|--------------|----------------------|---|---------------------------------------|----------|
| | • | | e personal checks, cashiers' checks, promissory notes, and money orders. re those you cannot transfer to someone by signing or delivering them. | | |
| | Yes. | Describe | Issuer name: | \$ | 0.00 |
| 21. | | or pension acc | | | |
| | | nterests in IRA, El | RISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | | |
| | No. | Describe | Type of account and Institution name: | | |
| | 1 es. | Describe | Type of account and mentation name. | \$ | 0.00 |
| 22. | Security de | posits and pre | payments | | |
| | | | sits you have made so that you may continue service or use from a company andlords, prepaid rent, public utilities (electric, gas, water), telecommunications | | |
| | No. | Agreements with it | andiords, prepaid tent, public dutities (electric, gas, water), teleconfindifications | | |
| | Yes. | Describe | Institution name or individual: | | |
| | | | | \$ | 0.00 |
| 23. | Annuities (| A contract for a | periodic payment of money to you, either for life or for a number of years) | | |
| | No. | | | | |
| | Yes. | Describe | Issuer name and description: | • | 0.00 |
| 24 | Interests in | an aducation I | RA, in an account in a qualified ABLE program, or under a qualified state tuition program. | \$ | 0.00 |
| 24. | | § 530(b)(1), 529A | | | |
| | No. | | | | |
| | Yes. | Describe | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): | | |
| | | | | \$ | 0.00 |
| 25. | | itable or future | interests in property (other than anything listed in line 1), and rights or powers | | |
| | No. | Describe | | | |
| | Yes. | Describe | | ¢ | 0.00 |
| 26. | Patents, co | pyrights, trade | marks, trade secrets, and other intellectual property | Ψ | <u> </u> |
| | | | mes, websites, proceeds from royalties and licensing agreements | | |
| | No. | | | | |
| | Yes. | Describe | | _ | |
| 27 | licaneae f | ranchises and | other general intangibles | \$ | 0.00 |
| | | | xclusive licenses, cooperative association holdings, liquor licenses, professional licenses | | |
| | No. | | | | |
| | Yes. | Describe | | | |
| | | | | \$ | 0.00 |
| | | | | | |
| Mor | ney or prop | erty owed to yo | u? | Current value of the portion you own? | |
| | | | | Do not deduct secured cla | aims |
| | | | | or exemptions | |
| 28 | Tax refund | s owed to you | | | |
| | No. | o onou to you | | | |
| | Yes. | Describe | | | |
| | | | | \$ | 0.00 |
| 29. | Family sup | - | | | |
| | | Past due or lump s | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement | | |
| | No. | Dogoribo | | | |
| | Yes. | Describe | | \$ | 0.00 |
| 30. | Other amo | unts someone d | owes you | Ψ. | |
| | | | ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, | | |
| | Social Secu | ırıty benefits; unpa | id loans you made to someone else | | |
| | Yes. | Describe | | | |
| | L 1 cs. | De30110E | | \$ | 0.00 |

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Document Page 13 of 60 umber (if known) Doc 1 Tara

Desc Main Debtor 1 First Name 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: l Yes. Describe..... 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Describe..... Yes. 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Yes. Describe..... 0.00 35. Any financial assets you did not already list Describe..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,900.00 for Part 4. Write that number here---Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No. Describe..... 0.00 41. Inventory No. Describe..... 0.00 42. Interests in partnerships or joint ventures No. Name of Entity and Percent of Ownership: Describe..... 0.00 43. Customer lists, mailing lists, or other compilations

0.00

No. Yes.

Describe.....

| 44. Any business-related property you did not already list No. | |
|--|-----------------|
| Yes. Describe | \$0.00 |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here> | \$ 0.00 |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. | |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| Yes. Describe | \$ 0.00 |
| 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. | |
| Yes. Describe | s 0.00 |
| 48. Crops—either growing or harvested No. | |
| Yes. Describe | \$0.00 |
| 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. | |
| Yes. Describe | \$0.00 |
| 50. Farm and fishing supplies, chemicals, and feed No. | |
| Yes. Describe | \$ <u>0.0</u> 0 |
| 51. Any farm- and commercial fishing-related property you did not already list No. | |
| Yes. Describe | \$0 <u>.0</u> 0 |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here | \$0.00 |
| Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. | |
| Yes. Describe | \$0.00 |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here> | \$0.00 |

Case 17-81199 Entered 05/19/17 10:27:08 Page 15 of 60 umber (if known) Doc 1 Filed 05/19/17 Desc Main Tara Debtor 1 Döcument

First Name

List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$ 0.00 56. Part 2: Total vehicles, line 5 \$ 1,580.00 57. Part 3: Total personal and household items, line 15 \$ 1,900.00 58. Part 4: Total financial assets, line 36 \$ 0.00 59. Part 5: Total business-related property, line 45 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00 61. Part 7: Total other property not listed, line 54 \$3,480.00 \$3,480.00 62. Total personal property. Add lines 56 through 61. 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$3,480.00

Record # 720027 Official Form 106A/B Page 6 of 6 Schedule A/B: Property

Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main

| Fill in this in | formation to ident | ify your case: | |
|---------------------|----------------------|-------------------------------------|-----------------|
| Debtor 1 | Tara | Nicole | Aiello |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number | | | _ |
| (If known) | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identif | y the Property You Claim as Exempt | | | |
|-------------------------|--|--------------------------------------|---|--------------------------------------|
| Which set of exe | emptions are you claiming? Check | one only, even if your spo | ouse is filing with you. | |
| You are clair | ming state and federal nonbankrupto | cy exemptions . 11 U.S.C. | § 522(b)(3) | |
| You are clair | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | |
| | | | | |
| For any property | y you list on <i>Schedule A/B</i> that yo | u claim as exempt, fill in t | the information below. | |
| • | n of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Furniture, linens | <u>\$</u> 250 | \$ | 735 ILCS 5/12-1001(b) - \$250.00 |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Flat screen TV, computer, printer, music collection, cell phone, gaming system, video games. | \$ <u>680</u> | \$ | 735 ILCS 5/12-1001(b) - \$680.00 |
| Line from Schedule A/B: | <u>07</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Everyday clothes,leather coats, shoes, accessories | \$ <u>300</u> | \$ | 735 ILCS 5/12-1001(a),(e) - \$300.00 |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Everyday jewelry, costume jewelry, engagement rings, wedding rings | \$_350 | | 735 ILCS 5/12-1001(b) - \$350.00 |
| Line from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| Official Form 106C | Record # 720027 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 2 |

Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main

Debtor 1 Tara Nicole Document Page 17 of 60 Case Number (if known)

Last Name

Middle Name

First Name

| | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|-----------------------------|--|--------------------------------------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Checking Account, Chase, 600.00 | \$ <u>600</u> | \$ | 735 ILCS 5/12-1001(b) - \$600.00 |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Other financial account, Prepaid AmEX card, 1,300.00 | \$_ 1,300 | | 735 ILCS 5/12-1001(b) - \$1,300.00 |
| Line from Schedule A/B: | 17 | | 100% of fair market value, up to any applicable statutory limit | |
| Are you claimin | g a homestead exemption of more | than \$155 675? | | |
| No. Yes. Did you No Yes. | acquire the property covered by th | e exemption within 1,215 c | lays before you filed this case? | |
| | | | | |
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| Fill in this | information to ident | | Lilod NE/10/1 / Ex | etered 05/19/17 10:27:08 8 of 60 | Desc Main | |
|-------------------|---------------------------|--------------------------------------|---|---|--|-------------------|
| Debtor 1 | Tara | Nicole | Aiello | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | - | | | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | | | |
| United Sta | tes Bankruptcy Court for | the : <u>NORTHERN</u> District of | <u>ILLINOIS</u> | | | |
| Case Num | her | | (State) | | Check if thi | s is an |
| (If known) | | | | | amended fi | ling |
| Official | Form 106D | | | | | |
| | | | | | | 40/4 |
| Schedu | e D: Creditor | s Who Have Clair | ns Secured by Prop | perty | | 12/15 |
| information. | If more space is need | | e, fill it out, number the entries | equally responsible for supplying correc , and attach it to this form. On the top of | | |
| 1. Do any o | reditors have claims | secured by your property? | | | | |
| No. | Check this box and su | bmit this form to the court wit | th your other schedules. You ha | ve nothing else to report on this form. | | |
| Yes | Fill in all of the inform | ation below | | | | |
| | | a | | | | |
| Part 1: | List All Secured Cla | ims | | | | |
| . 12.4.11 | | and Phone In a constant the constant | and the last the second transfer | Column A | Column A | Column C |
| | | | cured claim, list the creditor sepa laim, list the other creditors in Pa | ort ? | Value of collateral that supports this | Unsecured portion |
| | | · • | ccording to the creditors name. | Do not deduct the value of collateral | claim | If any |
| , 10 11100 | | | | | | |
| 7.0 | | | | | | |
| 7.00 | | | | | | |
| 7.6 11140 | | | | | | |
| 7.6 1.1.25 | | | | | | |

| Fill in | this inf | Caco 17 91100 ormation to identify your case | | Filod 05/10/17 | Entered 05/19/17 10:27: 9 of 60 | 08 [| Desc Main | |
|--|--|---|---|--|---|--|-----------------------|--------------------------|
| | | | | | 3 01 00 | | | |
| Debto | r 1 | | licole | Aiello | | | | |
| Dabta | - 0 | First Name Min | ddle Name | Last Name | | | | |
| Debtoi (Spouse, | | First Name Mic | ddle Name | Last Name | | | | |
| | | | | | | | | |
| United | States E | Bankruptcy Court for the : <u>NORTI</u> | HERN_ Distric | ct of <u>ILLINOIS</u> (State) | | | | Eddin to one |
| Case I | Number _ | | | | | | _ | f this is an |
| | | 400E/E | | | | | amende | a illing |
| | al Fo | orm 106E/F | | | | | | |
| e as con ist the o l/B: Prop reditors eeded, o | mplete a ther pa perty (O with pa copy the y additi | rty to any executory contracts fficial Form 106A/B) and on S irtially secured claims that are | Part 1 for cr s or unexpire chedule G: E e listed in Sc nber the entr and case nun | reditors with PRIORITY claim ed leases that could result in Executory Contracts and Une hedule D: Creditors Who Ha ies in the boxes on the left. A | s and Part 2 for creditors with NONPRIOF as claim. Also list executory contracts on a cypired Leases (Official Form 106G). Do not be Claims Secured by Property. If more substance the Continuation Page to this page | Schedule not include pace is | | |
| 1. Do a | ny cred | itors have priority unsecured | claims agair | nst you? | | | | |
| N | lo. Go | to Part 2. | | | | | | |
| ☐ Y | es. | | | | | | | |
| each nonp unse | claim li riority a cured c | sted, identify what type of clain mounts. As much as possible, | n it is. If a cla list the claims Page of Part | im has both priority and nonpr s in alphabetical order accordi 1. If more than one creditor ho | secured claim, list the creditor separately fo iority amounts, list that claim here and show ing to the creditor's name. If you have more olds a particular claim, list the other creditor action booklet.) | w both price than two rs in Part 3 | ority and priority | Nonpriority |
| | | | | | | | amount | amount |
| Part 2 | Li | st All of Your NONPRIORITY Un | secured Clair | ms | | | | |
| 3. Do a | ny cred | itors have nonpriority unsecu | red claims a | gainst you? | | | | |
| | lo. You | have nothing to report in this p | oart. Submit | this form to the court with you | r other schedules. | | | |
| _ _ Y | 'es. | | | | | | | |
| nonp inclu | riority u ded in F | nsecured claim, list the creditor | r separately f r holds a part | or each claim. For each claim | or who holds each claim. If a creditor has listed, identify what type of claim it is. Do n itors in Part 3.If you have more than three r | ot list clair | ms already | |
| 4.1 A | dliant Ei | nergy | L | ast 4 digits of account number | | | | Total claim \$ 540.00 |
| c | | Biltmore Lane | | hen was the debt incurred? | | | | |
| N | lumber | Street | | | | | | |
| _ | | | _ ^: | s of the date you file, the claim Contingent | is: Check all that apply. | | | |
| M | ladison | WI 53707 | <u>,</u> | Unliquidated | | | | |
| | ity o owes 1 | State Zip Co the debt? Check one. | de _ | Disputed | | | | |
| | Debtor 1 | | _ | - | | | | |
| | Debtor 2 | only | Ty | pe of NONPRIORITY unsecure | ed claim: | | | |
| | Debtor 1 | and Debtor 2 only | | Student loans | | | | |
| | At least o | one of the debtors and another | | Obligations arising out of a sepa | ration agreement or divorce | | | |
| | | this claim relates to a | _ | that you did not report as priority | | | | |
| | | nity debt subject to offest? | L | Debts to pension or profit-sharin | g pians, and other similar debts | | | |
| | No | , | | Other. Specify Utility Bills/C | ellular Service | | | |
| $\vec{\Pi}$ | Yes | | | | | | | |

Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Doc 1 Page 20 of 60 Case Number (if known) Decument Tara Nicole Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.2 ARS Account Resolution | Last 4 digits of account number 6259 | \$ <u>344.00</u> |
|--|---|--------------------|
| Creditor's Name | 2010 2017 | |
| 1643 Harrison Pkwy Ste 1 | When was the debt incurred? 2016-2017 | |
| Number Street | | |
| | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Sunrise FL 3332 | Unliquidated | |
| City State Zip C | ode Disputed | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| │ | | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Medical Debt | |
| Yes | | |
| 4.3 Carroll & Carroll | Last 4 digits of account number | <u>\$_3,752.00</u> |
| Creditor's Name | | |
| 114 S. Jefferson St. | When was the debt incurred? | |
| Number Street | | |
| - Nambor - Subst | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Woodstock IL 6009 | Unliquidated | |
| City State Zip C | | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| = | Obligations arising out of a separation agreement or divorce | |
| At least one of the debtors and another | | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Attorney's Fees & Notice | |
| Yes | | |
| 4.4 Charter Communications | Last 4 digits of account number <u>5285</u> | \$ _250.00 |
| Creditor's Name | | |
| 4120 International Pkwy | When was the debt incurred? 2017-2017 | |
| Number Street | | |
| | As of the date you file the claim is: Check all that analy | |
| | As of the date you file, the claim is: Check all that apply. | |
| Carrollton TX 7500 | Contingent | |
| | Unliquidated | |
| City State Zip C Who owes the debt? Check one. | ode Disputed | |
| _ | | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Depth to perision of profit-straining plants, and other similar depts | |
| No | Collecting for Creditor | |
| _ = | Other. Specify Collecting for Creditor | |
| Yes | | |

Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Page 21 of 60 Case Number (if known) Qgcument Tara Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Collins Asset Group **\$** 1,036.72 Last 4 digits of account number _ Creditor's Name 5725 W. HWY 290 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent TX 78735 Austin Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Extended to Debtor(S) Yes Commonwealth Edison \$ 0.00 Last 4 digits of account number 4.6 Creditor's Name 3 Lincoln Center 4th Floor When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60181 Oakbrook Terrace IL Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___Utility Bills/Cellular Service Yes Discover FIN SVCS LLC **NULL** \$ 2,166.00 4.7 Last 4 digits of account number Creditor's Name 2012-2014 Po Box 15316 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Wilmington 19850 Unliquidated

Schedule E/F: Creditors Who Have Unsecured Claims

Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Page 22 of 60 Case Number (if known) **Document** Tara Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** GE Capital Retail BANK \$ 1,376.00 Last 4 digits of account number _ Creditor's Name 2014-2014 2365 Northside Dr Ste 30 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent San Diego CA 92108 Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Unknown Credit Extension GE Capital Retail BANK \$ 3,268.00 Last 4 digits of account number 4.9 2014-2014 120 Corporate Blvd Ste 1 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Norfolk 23502 VA Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___Unknown Credit Extension Yes Ken Ayres Jr \$ 5,500.00 4.10 Last 4 digits of account number Creditor's Name 4913 Maple Hill Dr When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Mc Henry 60050 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only

Schedule E/F: Creditors Who Have Unsecured Claims

| | Case 17-81199 | Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main | |
|-----------|---|---|------------------|
| Debtor 1 | Torr | Decument Page 23 of 60 | |
| Debter 1 | First Name Middle Name | Last Name | _ |
| Pari | Your NONPRIORITY Unsecured Clai | ms - Continuation Page | |
| After lis | sting any entries on this page, number th | em beginning with 4.4, followed by 4.5, and so forth. | Total Clain |
| 4.11 | Kohls/Capone | Last 4 digits of account number NULL | \$ 546.00 |
| | Creditor's Name N56 W 17000 Ridgewood Dr | When was the debt incurred? 2011-2014 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| , w | Menomonee Falls WI 53051 City State Zip Code //ho owes the debt? Check one. | Contingent Unliquidated Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| ΙĒ | Check if this claim relates to a | that you did not report as priority claims | |
| Is | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No Yes | Other. Specify <u>Credit Card or Credit Use</u> | |
| 4.12 | Mercy Health System | Last 4 digits of account number | \$ 35.00 |
| | Creditor's Name PO Box 5003 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Janesville WI 53547 | Unliquidated | |

| 4.11 | Tronis/eapone | Last 4 digits of account number | 3 0 + 0.00 |
|------|---|---|-----------------------|
| | Creditor's Name | 2011 2011 | |
| | N56 W 17000 Ridgewood Dr | When was the debt incurred? 2011-2014 | |
| | Number Street | | |
| | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent | |
| | Menomonee Falls WI 53051 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | = | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | Sales. Spooliy | |
| 4.12 | Mercy Health System | Last 4 digits of account number | \$ 35.00 |
| 4.12 | | Lust 7 digits of account number | * |
| | Creditor's Name PO Box 5003 | When was the debt incurred? | |
| | | when was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | | |
| | Janesville WI 53547 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | = | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | Debts to pension of profit-straining plans, and other similar debts | |
| | No | - W. II. VD. + 10. : | |
| | = | Other. Specify Medical/Dental Service | |
| | Yes | | 4.075.00 |
| 4.13 | Midland Funding, LLC | Last 4 digits of account number | \$ 1,375.96 |
| | Creditor's Name | | |
| | 8875 Aero Drive, # 200 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the data year file the elements. Observed that | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Can Diago | Contingent | |
| | San Diego CA 92123 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who owes the debt? Check one. | □ ***** | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | _ | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | | |

Official Form 106E/F

Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Page 24 of 60 Case Number (if known) Decument Tara Nicole Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.14 | Nicor Gas | Last 4 digits of account number | \$ <u>0.00</u> |
|------|--|--|--------------------|
| | Creditor's Name | | |
| | PO Box 549 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Aurora IL 60507 | Unliquidated | |
| | City State Zip Code Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | _ | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | | |
| | No | Other. Specify Utility Bills/Cellular Service | |
| | Yes | | |
| 4.15 | Portfolio Recovery Assoc. | Last 4 digits of account number | \$ <u>3,267.79</u> |
| | Creditor's Name | When was the debt incurred? | |
| | 120 Corporate Blvd., Ste. 100 | when was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Norfolk VA 23502 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | | |
| | ■ No | Other. Specify Credit Card or Credit Use | |
| | Yes Progressive Insurance | Look d alimite of account mumbers | \$ 200.00 |
| 4.16 | Creditor's Name | Last 4 digits of account number | <u>\$ 200.00</u> |
| | 6300 Wilson Mills Rd | When was the debt incurred? | |
| | Number Street | | |
| | | As of the data year file the alaim in Check all that analy | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Mayfield Village OH 44143 | Unliquidated | |
| | City State Zip Code | | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Out of a six Services Rendered | |
| | Yes | Other. Specify Services Rendered | |
| | ∟ 100 | | |

Official Form 106E/F

Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Page 25 of 60 Case Number (if known) **Decument** Tara Nicole Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4 | 4.17 Sunnyside Company | Last 4 digits of account number | \$ <u>0.00</u> |
|---|--|---|----------------|
| Г | Creditor's Name | | |
| П | 4810 W Elm | When was the debt incurred? | |
| П | Number Street | | |
| П | Route 120 | As of the date you file, the claim is: Check all that apply. | |
| П | Ma Hanni II 60050 | Contingent | |
| П | Mc Henry IL 60050 | Unliquidated | |
| П | City State Zip Code Who owes the debt? Check one. | Disputed | |
| П | Debtor 1 only | | |
| П | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| П | Debtor 1 and Debtor 2 only | Student loans | |
| П | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| П | Check if this claim relates to a | that you did not report as priority claims | |
| П | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| П | Is the claim subject to offest? | _ | |
| П | Mo □ | Other. Specify Notice | |
| b | Yes 4 18 Syncb/Oldnavydc | Last 4 digits of account number NULL | \$ 0.00 |
| 4 | Creditor's Name | Last 4 digits of account number | <u> </u> |
| П | Po Box 965005 | When was the debt incurred? 2012-2014 | |
| П | Number Street | | |
| П | | As of the date you file, the claim is: Check all that apply. | |
| П | | Contingent | |
| П | Orlando FL 32896 | Unliquidated | |
| П | City State Zip Code | Disputed | |
| П | Who owes the debt? Check one. | | |
| П | Debtor 1 only Debtor 2 only | Time of MONDRIODITY improvinged plains | |
| П | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| П | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| П | | that you did not report as priority claims | |
| П | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| П | Is the claim subject to offest? | | |
| П | No | Other. Specify Credit Card or Credit Use | |
| L | Yes | | |
| 4 | 4.19 Syncb/TJX COS | Last 4 digits of account number NULL | \$ <u>0.00</u> |
| П | Creditor's Name Po Box 965005 | When was the debt incurred? 2012-2014 | |
| | Number Street | This has all dept mounted: | |
| | Halliber Oreet | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Orlando FL 32896 | Contingent | |
| П | City State Zip Code | Unliquidated | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other, Specify Credit Card or Credit Use | |
| | Yes | Other. Specify Credit Card or Credit Use | |
| | | | |

Official Form 106E/F

Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Doc 1 Page 26 of 60 Case Number (if known) **Decument** Tara Nicole Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.20 | Syncb/Walmart | Last 4 digits of account number NULL | \$ <u>0.00</u> |
|----------|--|---|------------------|
| | Creditor's Name | | |
| | Po Box 965024 | When was the debt incurred? 2012-2014 | |
| | Number Street | | |
| | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Orlando FL 32896 | Unliquidated | |
| | City State Zip Code | | |
| _ v | Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l î | Debtor 1 and Debtor 2 only | Student loans | |
| 1 8 | = | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 1 | s the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | <u> </u> | |
| 4.21 | Synchrony BANK | Last 4 digits of account number0846 | \$ 313.00 |
| | Creditor's Name | | |
| | 120 Corporate Blvd Ste 1 | When was the debt incurred? 2014-2014 | |
| | Number Street | | |
| | Number Succe | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Norfolk VA 23502 | Unliquidated | |
| | City State Zip Code | Disputed | |
| <u>v</u> | Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l î | Debtor 1 and Debtor 2 only | Student loans | |
| 1 8 | = | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| l . | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ! | s the claim subject to offest? | | |
| 1 ! | No | Other. Specify Unknown Credit Extension | |
| | Yes | | |
| 4.22 | WE Energies | Last 4 digits of account number | \$ 45.00 |
| | Creditor's Name | | |
| | 333 W. Everett Street | When was the debt incurred? | |
| 1 | Number Street | | |
| | Room A130 | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Milweyler | Contingent | |
| | Milwaukee WI 53203 | Unliquidated | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| l i | – | | |
| | Debtor 1 only | | |
| <u> </u> | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| Ī | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| 7 | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 . | s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| i | No | Litility Dillo/Collular Comiss | |
| | = | Other. Specify Utility Bills/Cellular Service | |
| | Yes | | |

Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Page 27 of 60 Case Number (if known) ___ **Decument** Tara Nicole Debtor 1 World Financial Network Bank-M 9370 \$ 1,192.00 4.23 Last 4 digits of account number Creditor's Name 2014-2014 5725 W Highway 290 Ste 1 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Austin TX 78735 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Collecting for Creditor

community debt
Is the claim subject to offest?

No

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Decument

List Others to Be Notified for a Debt That You Already Listed

Page 28 of 60 Case Number (if known) Tara Nicole Debtor 1

| 5. | example, if a collection agency is trying to collect from 2, then list the collection agency here. Similarly, if you is additional creditors here. If you do not have additional j | you for a debt you have more than or | u owe to someone else, list the originate creditor for any of the debts that you | al creditor in Parts 1 or ou listed in Parts 1 or 2, list the |
|----|--|---|--|--|
| | McHenry County Clerk | | On which entry in Part 1 or Part 2 | list the original creditor? |
| | Name 2200 N. Seminary Ave. | | Line 5 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Woodstock | IL 60098 | Last 4 digits of account number _ | |
| | City State Shindler & Joyce | Zip Code | On which entry in Part 1 or Part 2 | list the original creditor? |
| | Name 1990 E. Algonquin Rd Suite 180 | | Line 5 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Schaumburg IL City State | 60173 Zip Code | Last 4 digits of account number _ | |
| | McHenry County Clerk | | On which entry in Part 1 or Part 2 | list the original creditor? |
| | Name 2200 N. Seminary Ave. | | Line 7 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Woodstock City State | IL 60098 Zip Code | Last 4 digits of account number _ | NULL |
| | Blitt and Gaines, PC | | On which entry in Part 1 or Part 2 | list the original creditor? |
| | Name 661 Glenn Ave. | | Line7 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Wheeling IL City State | 60090 Zip Code | Last 4 digits of account number _ | NULL |
| | McHenry County Clerk | | On which entry in Part 1 or Part 2 | list the original creditor? |
| | Name 2200 N. Seminary Ave. | | Line 13 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Woodstock City State | IL 60098 Zip Code | Last 4 digits of account number _ | |
| | Blatt, Hasenmiller, Leibsker & Moore LLC | | On which entry in Part 1 or Part 2 | list the original creditor? |
| | Name 10 S. LaSalle St. Ste 2200 | | Line 13 of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | Chicago IL | 60603 | Last 4 digits of account number _ | |
| | | Zip Code | - - | |

Schedule E/F: Creditors Who Have Unsecured Claims

Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Case 17-81199 Page 29 of 60 Case Number (if known) **Decument** Tara Nicole Debtor 1 First Name Middle Name Last Name McHenry County Clerk On which entry in Part 1 or Part 2 list the original creditor? Name 2200 N. Seminary Ave. Line <u>15</u> of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Street Number Woodstock IL 60098 Last 4 digits of account number _ City State Zip Code Blatt, Hasenmiller, Leibsker & Moore LLC On which entry in Part 1 or Part 2 list the original creditor? Name Line __15_ of (Check one): Part 1: Creditors with Priority Unsecured Claims 10 S. LaSalle St. Ste 2200 Part 2: Creditors with Nonpriority Unsecured Claims Number Street

Last 4 digits of account number ____ _

60603

State Zip Code

Chicago City

Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Page 30 of 60 Case Number (if known)

Schedule E/F: Creditors Who Have Unsecured Claims

Tara Debtor 1

Nicole

Decument

Add the Amounts for Each Type of Unsecured Claim

| 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|----|---|---|
| | Add the amounts for each type of unsecured claim. | |

| | | | Total claim |
|-----------------------------|--|------------|--------------------|
| Total claims | 6a. Domestic support obligations | 6a. | \$0.00 |
| Hom Fait 1 | 6b. Taxes and Certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | |
| | | | Total claim |
| Total claims | 6f. Student loans | 6f. | Total claim \$0.00 |
| Total claims from Part 2 | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | 0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other | 6g. | \$ |

| F:II. | in thin int | | | 2.1 Filod 05/10/17 | Entered 05/19/17 10:27:08 Desc Main | |
|--|--------------------------------------|--|-------------------------------|---|--|-----|
| ГШ | ın unis ini | formation to it | lentify your case: | | 1 of 60 | |
| Deb | otor 1 | Tara | Nicole | Aiello | _ | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 use, if filing) | First Name | Middle Name | Last Name | - | |
| Lloit | tod Staton | Pankruptov Cour | t for the : NODTHEDN I | District of ULINOIS | | |
| | | | t for the : <u>NORTHERN</u> I | (State) | Check if this is an | |
| | se Number (nown) | | | | amended filing | |
| Offic | rial Fo | orm 1060 | G | | | |
| | | | | s and Unexpired Lea | nege 12 | /15 |
| Be as on the second sec | complete ation. If m nal pages | and accurate nore space is i s, write your n | as possible. If two marri | ed people are filing together, bo nal page, fill it out, number the 6 f known). | th are equally responsible for supplying correct entries, and attach it to this page. On the top of any | |
| | No. Ch | eck this box an | nd submit this form to the | court with your other schedules. | You have nothing else to report on this form. | |
| | Yes. Fill | in all of the inf | formation below even if th | e contracts or leases are listed in | Schedule A/B: Property (Official Form 106A/B) | |
| exa | - | nt, vehicle lea | · - | = | e. Then state what each contract or lease is for (for struction booklet for more examples of executory contracts and | |
| P | erson or | company with | whom you have the cor | ntract or lease | State what the contract or lease is for | |
| 2.1 | H&H Mi | ni Unit Storage | • | | _ | |
| | Name 345 S. V | Vooster St. | | | | |
| | Number | Street | | | _ | |
| | Capron | | | IL 61012 | _ | |
| 2.2 | City | | | State Zip Code | | _ |
| | Name | | | | _ | |
| | | | | | _ | |
| | Number | Street | | | | |
| | City | | | State Zip Code | _ | |
| 2.3 | | | | | | _ |
| | Name | | | | _ | |
| | | | | | _ | |
| | Number | Street | | | | |
| | City | | | State Zip Code | _ | |
| | | | | | | _ |
| 2.4 | | | | | _ | |
| | Name | | | | | |
| | Number | Street | | | | |
| | City | | | State Zip Code | _ | |
| 0.5 | Опу | | | Sale Zip Code | | |
| 2.5 | | | | | _ | |
| | Name | | | | | |
| | Number | Street | | | _ | |

State Zip Code

City

Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main

| Fill in this in | nformation to ider | ntify your case: | |
|---------------------|---------------------|--|-----------|
| Debtor 1 | Tara | Nicole | Aiello |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of _ | |
| Case Number | er | | (State) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A | dditional Pag | es, write your name and case | number (if Known). Answ | er every question. | |
|-------------|---------------|---|---------------------------------|---------------------|--|
| 1. D | o you have a | ny codebtors? (If you are filing | g a joint case, do not list eit | her spouse as a coo | debtor.) |
| | No. Yes | | | | |
| | | 8 years, have you lived in a c rnia, Idaho, Lousiiana, Nevada | | • , | nunity property states and territories include n, and Wisconsin.) |
| | No. Go to I | ine 3. | | | |
| | Yes. Did yo | our spouse, former spouse, or | legal equivalent live with yo | ou at the time? | |
| | _ | nwhich community state or ter | ritory did you live? | Fill | in the name and current address of that person. |
| | Name of | your spouse, former spouse or legal equ | uivalent | , | |
| | Number | Street | | | |
| | City | | State | Zip Code | |
| s | - | or Schedule G to fill out Colu | | | ficial Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |
| 3.2 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |
| 3.3 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |

Official Form 106H Record # 720027 Schedule H: Your Codebtors Page 1 of 1

| | Case 17-8119 | | ment Page 3 | ed 05/19/17 10 3 of 60 | 7.27.00 DC3C Maii | |
|---|--|---|--|---------------------------|--|-------|
| ll in this ir | nformation to identify you | | | 0. 00 | | |
| ebtor 1 | Tara | Nicole | Aiello | | | |
| | First Name | Middle Name | Last Name | | | |
| ebtor 2 pouse, if filing) | First Name | Middle Name | Last Name | | | |
| nited States | Bankruptcy Court for the : _ | NORTHERN DISTRICT OF ILLINO | IS | | | |
| ase Numbe | r | | | Check if this | is: | |
| f known) | | | | An ame | ended filing | |
| | | | | | lement showing post-petition | |
| | | | | chapter | 13 income as of the following of | date: |
| <u>icial F</u> | orm 1061 | | | MM / D | D / YYYY | |
| hedul | e I: Your Inco | ome | | | | |
| | | e. If two married people are filing | | | | |
| are separ ate sheet | rated and your spouse is | married and not filing jointly, ar not filing with you, do not includ if any additional pages, write you | de information about your s | pouse. If more space is | needed, attach a | |
| are separ rate sheet | rated and your spouse is to this form. On the top o Describe Employment | not filing with you, do not include | de information about your s | pouse. If more space is | needed, attach a | e |
| are separate sheet: It 1: Fill in you information | rated and your spouse is to this form. On the top o Describe Employment | not filing with you, do not include | de information about your s ur name and case number (| pouse. If more space is | needed, attach a y question. | e |
| are separate sheet: t1: Fill in you information If you have attach a separate sheet: | rated and your spouse is to this form. On the top of th | not filing with you, do not include | de information about your s ur name and case number (| pouse. If more space is | needed, attach a y question. | e |
| are separate sheet: t1: Fill in you information If you have attach a separate sheet: | parent and your spouse is to this form. On the top of t | not filing with you, do not includ of any additional pages, write you | de information about your s ur name and case number (Debtor 1 | pouse. If more space is | p needed, attach a y question. Debtor 2 or non-filing spous | e |
| are separate sheet ### Till in you information If you have attach a sinformatic employer Include pulposer | rated and your spouse is to this form. On the top of th | not filing with you, do not includ of any additional pages, write you | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| Fill in you information attach a sinformatic employer. | rated and your spouse is to this form. On the top of th | not filing with you, do not includ of any additional pages, write you | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| are separate sheet 11: Fill in you information If you have attach a sinformation employer Include poself-employer Occupation | rated and your spouse is to this form. On the top of th | not filing with you, do not includ if any additional pages, write you Employment status Occupation | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| are separate sheet 11: Fill in you information If you have attach a sinformation employer Include poself-employer Occupation | rated and your spouse is to this form. On the top of th | not filing with you, do not includ if any additional pages, write you Employment status | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| are separate sheet 11: Fill in you information If you have attach a sinformation employer Include poself-employer Occupation | rated and your spouse is to this form. On the top of th | not filing with you, do not includ if any additional pages, write you Employment status Occupation | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| Fill in you information attach a sinformation employer Include poself-employer Occupation | rated and your spouse is to this form. On the top of th | not filing with you, do not include fany additional pages, write you be seen that the | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| Fill in you information attach a sinformation employer Include poself-employer Occupation | rated and your spouse is to this form. On the top of th | not filing with you, do not include fany additional pages, write you be seen that the | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| Fill in you information attach a sinformation employer Include poself-employer Occupation | rated and your spouse is to this form. On the top of th | not filing with you, do not include fany additional pages, write you be seen that the | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |
| Fill in you information attach as information employer Include puself-emplor or homen | rated and your spouse is to this form. On the top of th | not filing with you, do not include fany additional pages, write you fany additional pages, write you fany additional pages, write you fany fany fany fany fany fany fany fany | Debtor 1 | pouse. If more space is | Debtor 2 or non-filing spous | e |

lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary and commissions (before all payroll \$0.00 \$0.00 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. \$0.00 \$0.00 Calculate gross income. Add line 2 + line 3. \$0.00 \$0.00

Official Form 106I Record # 720027 Schedule I: Your Income Page 1 of 2 Case 17-81199 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Doc 1 Page 34 of 60

Document Nicole Tara Debtor 1 Case Number (if known) First Name Last Name

| | | | | For Debtor 1 | | Debtor 2 or filing spouse | | |
|---------------|------------------------|--|-----------------------------------|-------------------------|-----------|------------------------------|-----|------------|
| | Copy | / line 4 here | 4. | \$0.00 | | \$0.00 | | |
| 5. L | | payroll deductions: | | | | | | |
| | 5a. T | ax, Medicare, and Social Security deductions | 5a. | \$0.00 | | \$0.00 | | |
| | 5b. N | Mandatory contributions for retirement plans | 5b. | \$0.00 | | \$0.00 | | |
| | 5c. V | oluntary contributions for retirement plans | 5c | \$0.00 | | \$0.00 | | |
| | 5d. F | Required repayments of retirement fund loans | 5d. | \$0.00 | | \$0.00 | | |
| | 5e. lı | nsurance | 5e. | \$0.00 | | \$0.00 | | |
| | 5f. C | Omestic support obligations | 5f. — | \$0.00 | | \$0.00 | | |
| | 5g. L | Inion dues | 5g. | \$0.00 | | \$0.00 | | |
| | 5h. C | Other deductions. Specify: | 5h. | \$0.00 | | \$0.00 | | |
| 6. A d | d the | payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$0.00 | | \$0.00 | | |
| 7. C a | alcula | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | | \$0.00 | | |
| 8. Li | st all | other income regularly received: | | | | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | | |
| | | profession, or farm | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$0.00 | | \$0.00 | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 1200.00 | | \$ 0.00 | | |
| | | dependent regularly receive | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.00 | | |
| | 8e. | Social Security | 8e. | \$0.00 | | \$0.00 | | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | | \$0.00 | | |
| | | Include cash assistance and the value (if known) of any non-cash | | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | 0~ | Specify: | 0 | #0.00 | | #0.00 | | |
| | 8g. | Pension or retirement income | 8g. | \$0.00 | | \$0.00 | | |
| • | 8h. | Other monthly income. Specify: | 8h. — | \$0.00 | | \$0.00 | | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9 | \$1,200.00 | | \$0.00 | | |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$1,200.00 + | | \$0.00 | · [| \$1,200.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | <u> </u> | V 1,200.00 | | 40.00 | _ | Ψ1,200.00 |
| 11. | Inclu other Do n | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are notify: | our dependent not available to | • | | | 11 | \$0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Ce | | • | annlies | | 12. | \$1,200.00 |
| 13. | | ou expect an increase or decrease within the year after you file this form | | o and Nowied Daid, II I | . applies | | L | |
| | x I | | | | | | | |

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| Fill in thi | is information to identify | y your case: | | | | |
|--|--|--|-------------------------------------|---|-------------------|---|
| Debtor 1 Debtor 2 (Spouse, if file | | Nicole Middle Name Middle Name | Aiello Last Name Last Name | · · · | • | t-petition chapter 13 date: |
| Case Nur | | e : <u>NORTHERN DISTRICT O</u> | F ILLINOIS | | YYYY | |
| (If known) | - 400 l | | | A separate | filing for Debtor | 2 because Debtor 2 |
| Official | Form 106J | | | maintains a | a separate house | ehold. |
| Sched | ule J: Your E | xpenses | | | | 12/ |
| - | | | | are equally responsible for supplyinges, write your name and case nun | = | |
| Part 1: | Describe Your Househ | old | | | | |
| X | No. | n a separate household? must file a separate Schedul | e J. | | | |
| _ | ou have dependents? ot list Debtor 1 and | No X Yes. Fill out | this information for | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| Debte Do ne name | ot state the dependents' | each depend | dent | Daughter | 8 | No X Yes No |
| | | | | Son | 4 | X Yes X No Yes X No Yes X No Yes X No Yes Yes |
| expe | our expenses include nses of people other that self and your dependen | | | | | |
| Part 2: | Estimate Your Ongoin | g Monthly Expenses | | | | |
| expenses a the applica Include exp | as of a date after the bar able date. penses paid for with no | nkruptcy is filed. If this is a n-cash government assista | supplemental <i>Schedule J</i> | m as a supplement in a Chapter 13 , check the box at the top of the for | m and fill in | Your expenses |
| | | ded it on Schedule I: Your | · | • | | |
| any i | rental or nome ownersh rent for the ground or lot. t included in line 4: | iip expenses for your resid | e nce. Include lirst mortgag | e payments and | 4. | \$0.00 |
| 4a. | Real estate taxes | | | | 4a. | \$0.00 |
| 4b. | Property, homeowner's, | , or renter's insurance | | | 4b. | \$0.00 |
| 4c. 4d. | • | pair, and upkeep expenses on or condominium dues | | | 4c. 4d. | \$0.00 \$0.00 |
| | | | | | | |

Schedule J: Your Expenses

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Document Tara Nicole Debtor 1 Case Number (if known) _ First Name Middle Name Last Name

| First Name | e Middle Name Last Name | | | |
|---------------------|--|------|-------------|---------|
| | | | Your expens | ses |
| . Additional | Mortgage payments for your residence, such as home equity loans | 5. | | \$0.00 |
| . Utilities: | | | | |
| 6a. Elect | ricity, heat, natural gas | 6a. | | \$0.0 |
| 6b. Wate | er, sewer, garbage collection | 6b. | | \$0.0 |
| 6c. Telej | phone, cell phone, internet, satellite, and cable service | 6c. | | \$75.0 |
| 6d. Othe | r. Specify: | 6d. | \$ | 0.0 |
| . Food and | housekeeping supplies | 7. | | \$600.0 |
| Childcare | and children's education costs | 8. | | \$0.0 |
| . Clothing, I | aundry, and dry cleaning | 9. | | \$200.0 |
| D. Personal o | care products and services | 10. | | \$35.0 |
| 1. Medical ar | nd dental expenses | 11. | | \$150.0 |
| = | ation. Include gas, maintenance, bus or train fare. | 12. | | \$0.0 |
| Do not incl | ude car payments. | | | |
| 3. Entertainn | nent, clubs, recreation, newspapers, magazines, and books | 13. | | \$100.0 |
| | contributions and religious donations | 14. | | \$0.0 |
| 5. Insurance | | | | |
| DO HOU INC | ude insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life ir | surance | 15a. | | \$0.0 |
| 15b. Healt | n insurance | 15b. | | \$0.0 |
| 15c. Vehic | le insurance | 15c. | | \$0.0 |
| 15d. Other | insurance. Specify: | 15d. | | \$0.0 |
| 6. Taxes. Do | not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Specify: _ | | 16. | | \$0.0 |
| 7. Installmen | t or lease payments: | | | |
| 17a. Car p | ayments for Vehicle 1 | 17a. | | \$0.0 |
| 17b. Car p | ayments for Vehicle 2 | 17b. | | \$0.0 |
| 17c. Other | . Specify: | 17c. | | \$0.0 |
| 17d. Other | . Specify: | 17d. | | \$0.0 |
| 3. Your payn | nents of alimony, maintenance, and support that you did not report as deducted | | | |
| from your | pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | | \$0.0 |
| Other pay | ments you make to support others who do not live with you. | | | |
| Specify: | | 19. | | \$0.0 |
| Other real | property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | | |
| 20a. Mortg | ages on other property | 20a. | | \$ 0.0 |
| 20b. Real | estate taxes | 20b. | \$ | 0.0 |
| 20c. Prope | erty, homeowner's, or renter's insurance | 20c. | \$ | 0.0 |
| 20d. Maint | enance, repair, and upkeep expenses | 20d. | \$ | 0.0 |
| | | 20e. | \$ | 0.0 |

Official Form 106J Record # 720027 Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Document Page 37 of 60

Nicole Tara Debtor 1 Case Number (if known) _ First Name Middle Name Last Name \$0.00 21. 21. Other. Specify: _ 22.. Your monthly expense: Add lines 4 through 21. \$1,160.00 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$1,200.00 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$1,160.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$40.00 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 720027 Schedule J: Your Expenses Page 3 of 3

| Fill in this information to identify your case: | | | |
|---|----------------------|---------------------------------------|----------------------|
| Debtor 1 | Tara | Nicole | Aiello |
| | First Name | Middle Name | Last Name |
| Debtor 2 | - | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | r the : <u>NORTHERN</u> District of _ | ILLINOIS_ (State) |
| Case Number (If known) | | | _ |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|---|
| Did you pay or agree to pay someone who is N | OT an attorney to help you fill out bankruptcy forms? |
| No | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| | |
| Under penalty of perjury, I declare that I have r correct. | ead the summary and schedules filed with this declaration and that they are true and |
| | |
| /s/ Tara Nicole Aiello Signature of Debtor 1 | Signature of Debtor 2 |
| - | · |
| Date 05/17/2017 MM / DD / YYYY | DateMM / DD / YYYY |
| | |

| Fill in this in | Fill in this information to identify your case: | | | |
|---------------------------|---|---|--------------------|--|
| Debtor 1 | Tara First Name | Nicole Middle Name | Aiello Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court | for the : <u>NORTHERN</u> District of <u>II</u> | _LINOIS (State) | |
| Case Number (If known) | | | - | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part | (if known). Answer every question. Give Details About Your Marital Status and Where | You Lived Before | | |
|----------------|--|--------------------------|--|------------------|
| 01. W | at is your current marital status? | | | |
| | Married | | | |
| | Not married | | | |
| | | | | |
| 02 Du | ring the last 3 years, have you lived anywhere other | than where you live no | w? | |
| | No. | De continuito de colonia | and the second | |
| | Yes. List all of the places you lived in the last 3 years. | Do not include where y | ou live now. | |
| | Debtor 1 | Dates Debtor 1 | Debtor 2: | Dates Debtor 2 |
| | | lived there | | lived there |
| | | | Same as Debtor 1 | Same as Debtor 1 |
| | 4913 Maplehill Dr | FROM 04/2017 | | |
| | Mccullom Lake IL 60050-2421 | To 04/2017 | | |
| | | | | |
| | | | | |
| | | | Same as Debtor 1 | Same as Debtor 1 |
| | 4010 Oak Ave | FROM 09/2014 | | |
| | Mchenry IL 60050-6309 | To 12/2014 | | |
| | | | | |
| | | | | |
| | | | Same as Debtor 1 | Same as Debtor 1 |
| | 160 W School St | FROM 10/2015 | | _ |
| | Twin Lakes WI 53181-9789 | To 11/2015 | | |
| | | | | |
| | | | | |
| 03 Wi t | hin the last 8 years, did you ever live with a spouse | or legal equivalent in a | community property state or territory? (Community | |
| pro | perty states and territories include Arizona, Californ | | evada, New Mexico, Puerto Rico, Texas, Washington, | |
| | l Wisconsin.) No. | | | |
| _ | Yes. Make sure you fill out Schedule H: Your Codebto | rs (Official Form 106H). | | |
| | | | | |
| | | | | |

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Case Number (if known)

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Aiello

First Name Middle Name Last Name **Explain the Sources of Your Income** Part 2: Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, \$2,433 Wages, commissions, From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$9,065 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$10,000 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below (before deductions and Describe below. (before deductions and exclusions) exclusions) Child support \$5,490 From January 1 of current year until the date you filed for bankruptcy: Child support \$15,600 For last calendar year: (January 1 to December 31, 2016) For last calendar year: Child support \$15,600 (January 1 to December 31, 2015)

Debtor 1

Tara

Nicole

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 Debtor 1
 Tara
 Nicole
 Aiello
 Case Number (if known)

 First Name
 Middle Name
 Last Name

| Par | | | | | | |
|--------------|--|---|---|--|---|--|
| | List Certain Payments You Made Before You File | ed for Bankruptcy | | | | |
| 06 A | Are either Debtor 1's or Debtor 2's debts primarily co | nsumer debts? | | | | |
| | No. Neither Debtor 1 nor Debtor 2 has primarily o | onsumer debts. Co | nsumer debts are defin | ed in 11 U.S.C. § 101(8) a | us | |
| _ | "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | During the 90 days before you filed for bankrup | otcy, did you pay any | creditor a total of \$6,2 | 25* or more? | | |
| | ☐ No. Go to line 7. | | | | | |
| | Yes. List below each creditor to whom you | paid a total of \$6,22 | 5* or more in one or m | ore payments and the | | |
| | total amount you paid that creditor. Do not | | • • | _ | | |
| | child support and alimony. Also, do not inc * Subject to adjustment on 4/01/16 and every 3 yea | | - | • | | |
| | | | | | | |
| | Yes. Debtor 1 or Debtor 2 or both have primarily | | | | | |
| | During the 90 days before you filed for bankru | iptcy, did you pay ar | ly creditor a total of \$60 | JU or more? | | |
| | No. Go to line 7. | | | | | |
| | Yes. List below each creditor to whom you | paid a total of \$600 | or more and the total a | mount you paid that | | |
| | creditor. Do not include payments for dom | estic support obligati | ons, such as child supp | port and | | |
| | alimony. Also, do not include payments to | an attorney for this b | ankruptcy case. | | | |
| | | | | | | |
| | | Dates of payments | Total amount paid | Amount you still | owe Was this payment for | |
| | | | | | | |
| lı c a | Within 1 year before you filed for bankruptcy, did you m insiders include your relatives; any general partners; rel corporations of which you are an officer, director, perso agent, including one for a business you operate as a so such as child support and alimony. | atives of any genera n in control, or owne | I partners; partnerships r of 20% or more of the | s of which you are a gener ir voting securities; and ar | ny managing | |
| Ī | No. | | | | | |
| | Yes. List all payments to an insider. | Dates of | Tatal amazant | A | Dance of the thing are sent | |
| | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment | |
| 08 V | Within 1 year before you filed for bankruptcy, did you m an insider? | ake any payments o | r transfer any property | on account of a debt that I | penefited | |
| а | Include payments on debts guaranteed or cosigned by | an insider. | | | | |
| | No. | | | | | |
| li - | | | | | | |
| lı • | Yes. List all payments to an insider. | Data of | Total amazont | A | December this recover | |
| lı | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name | |

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| Debtor 1 | Tara | Nicole | Aiello | Case Number (if known) | |
|---------------|-------------------------|-------------------------------|---------------------------------|---|---------------------|
| | First Name | Middle Name | Last Name | | |
| Lis | | cluding personal injury case | | rt action, or administrative proceeding? es, collection suits, paternity actions, support or cus | tody |
| | No. | | | | |
| | Yes. Fill in the detail | ls. | | | |
| | | | Nature of the case | Court or agency | Status of the case |
| | Collins Asset Grou | ıp Llc VS Tara Aiello | Collection | McHenry County | Pending |
| | CASE NUMBER# | 15SC874 | | | On appeal |
| | | | | | Concluded |
| | | | | | |
| | _Discover Bank VS | Tara Aialla | Collection | McHenry County | Pending |
| | | _ | Collection | | On appeal |
| | CASE NUMBER# | 14303207 | | | Concluded Concluded |
| | | | | | Concluded |
| | | | | | |
| | Midland Funding L | lc VS Tara Aiello | Collection | McHenry County | Pending |
| | CASE NUMBER# | 14SC2822 | | | On appeal |
| | | | | | Concluded |
| | | | | | |
| | Portfolio Possyona | Access Lie VS Tara | Collection | MoHonry County | Pending |
| | | Assocs Llc VS Tara | Collection | McHenry County | On appeal |
| | Aiello | 1500677 | | | Concluded |
| | CASE NUMBER# | 1330077 | | | Concluded |
| | | | | | |
| | | u filed for bankruptcy, was a | any of your property repossess | ed, foreclosed, garnished, attached, seized, or levie | d? |
| | _ | i iii iii tile details below. | | | |
| | No. Go to line 11 | and the state of | | | |
| ⊢∟ | Yes. Fill in the inforr | nation below. | | | |
| | - | - | - | ank or financial institution, set off any amounts fr | om your accounts |
| _ | _ | yment because you owed | a debt : | | |
| _ | No. Go to line 11 | | | | |
| _ | Yes. Fill in the inforr | | s any of your property in the | possession of an assignee for the benefit of credi | tors a |
| | | er, a custodian, or anothe | | occount of an accignication the solicine of croal | 1010, 4 |
| | No. | | | | |
| | Yes. | | | | |
| Part | 5; List Certain Gif | ts and Contributions | | | |
| 13 W i | ithin 2 years before y | ou filed for bankruptcy, d | id you give any gifts with a to | tal value of more than \$600 per person? | |
| | No. | | | | |
| | Yes. Fill in the detail | Is for each gift. | | | |
| 14 W i | ithin 2 years before y | ou filed for bankruptcy, d | id you give any gifts or contri | butions with a total value of more than \$600 to an | y charity? |
| | No. | | | | |
| | Yes. Fill in the detail | Is for each gift. | | | |
| Part | Re List Certain Los | sses | | | |
| -1-6110 | | - | | | |
| | | | | | |
| | | | | | |

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| Debto | r 1 | Tara | Nicole | Aiello | Case Number (if ki | nown) | |
|-------|-------|---------------------------------|---|-----------------------------------|---|--------------------------|-------------------|
| | | First Name | Middle Name | Last Name | | | |
| 15 | | hin 1 year before yo nbling? | u filed for bankruptcy or si | nce you filed for bankruptcy, di | d you lose anything because of | theft, fire, other dis | saster, or |
| | | No. | | | | | |
| | _ | Yes. Fill in the detail | s for each gift. | | | | |
| F | art 7 | List Certain Pay | yments or Transfers | | | | |
| 16 | Wit | hin 1 year before yo | u filed for bankruptcy, did | you or anyone else acting on yo | our behalf pay or transfer any pro | operty to anyone y | ou |
| | | | ng bankruptcy or preparing | | ., | | |
| | Incl | ude any attorneys, l | bankruptcy petition prepar | ers, or credit counseling agenci | ies for services required in your | bankruptcy. | |
| | П | No. | | | | | |
| | | Yes. Fill in the detail | s | | | | |
| | _ | | | | | | |
| | | Party Contact Info | | Description and value of an | y property transferred | Date payment or transfer | Amount of payment |
| | | Geraci Law L.L.C. | | | | Ken Ayres, Jr. | \$1,675.00 |
| | | 55 E. Monroe Stree | ot #2400 | | | ,, . | |
| | | | Et #3400 | | | | |
| | | Chicago,IL 60603 | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Party Contact Info | | Description and value of an | y property transferred | Date payment or transfer | Amount of payment |
| | | Hananwill Credit C | ounseling | Credit Counseling Services | | 2017 | \$25.00 |
| | | - | ouricoming | | | | |
| | | 115 N. Cross St. | | | | | |
| | | Robinson, IL 62454 | 4 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | I | |
| 17 | pro | mised to help you d | · · · | o make payments to your credit | our behalf pay or transfer any protors? | operty to anyone w | /ho |
| | _ | | mone or duniolor that you h | otod on mio ro. | | | |
| | _ | No. | | | | | |
| | | Yes. Fill in the detail | S. | | | | |
| | | | | | | | |
| 18 | | | | = | ansfer any property to anyone, o | ther than property | |
| | | | ary course of your busines ansfers and transfers mad | | ing of a security interest or mort | gage on your prop | ertv). |
| | | _ | | Iready listed on this statement. | | 9g , pp. | |
| | | No. | | | | | |
| | _ | | a fan a a de aife | | | | |
| | Ц | Yes. Fill in the detail | s for each giπ. | | | | |
| 19 | | - | you filed for bankruptcy, d | | a self-settled trust or similar dev | ice of which you a | re a |
| | | No. | | | | | |
| | _ | | la fan a a la aift | | | | |
| | Ц | Yes. Fill in the detail | s for each gift. | | | | |
| P | art 8 | List Certain Fina | ancial Accounts, Instrument | s, Safe Deposit Boxes, and Storag | e Units | | |
| | | _ | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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| Debtor | 1 | Tara | Nicole | Aiello | Case | Number (if known) | | |
|-------------|---|--|-----------------|---|-------------------------------|--|---|---|
| | | First Name | Middle Name | Last Name | | | | |
| s | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No. | | | | | | | |
| [| □ Y | es. Fill in the details. | | | | | | |
| | | | | • | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| | | ou now have, or did you ha , or other valuables? | ve within 1 y | rear before you filed for bankruptcy, | any safe deposit box o | r other depository for | securities, | |
| | Ν | No. | | | | | | |
| [| ☐ Y | es. Fill in the details. | | | | | | |
| | | | | Who else had access to it? | Describe the conte | nts | Do you still | |
| 22 | lave | you stored property in a st | orage unit o | or place other than your home within | 1 year before you filed | for hankruntey? | have it? | |
| | | | orage and o | n place other than your nome within | T year before you mee | Tor builkruptcy: | | |
| | Υ | es. Fill in the details. | | | | | | |
| | | | | Who else has or had access to it? | Describe the conte | nts | Do you still have it? | |
| | | | | | Furniture, clothes | , toys | □No | |
| | _ | I&H Mini Storage | | No one | | | Yes | |
| | _ | 45 S. Wooster St. | | | | | | |
| | <u>C</u> | Capron IL 61012 | | | | | | |
| | - | | | | | | | |
| Par | rt 9: | Identify Property You Hol | d or Control t | for Someone Else | | | | |
| | or s | ou noid or control any propomeone. No. Yes. Fill in the details. | erty that sor | meone else owns? Include any property? | Describe the prope | | Value | |
| | | | | | | | | |
| Par | t 10: | Give Details About Enviro | onmental Info | rmation | | | | _ |
| For t | he p | ourpose of Part 10, the follow | ving definition | ons apply: | | | | |
| h | azar | rdous or toxic substances, v | vastes, or m | or local statute or regulation concer aterial into the air, land, soil, surface the cleanup of these substances, wa | e water, groundwater, o | | | |
| | | neans any location, facility, used to own, operate, or util | | as defined under any environmental ing disposal sites. | law, whether you now | own, operate, or utilize | е | |
| | | rdous material means anyth tance, hazardous material, p | _ | onmental law defines as a hazardou ntaminant, or similar term. | s waste, hazardous sul | ostance, toxic | | |
| Repo | rt al | ll notices, releases, and pro | ceedings tha | at you know about, regardless of wh | en they occurred. | | | |
| 24 F | las : | any governmental unit notif | ied you that | you may be liable or potentially liab | le under or in violation | of an environmental la | aw? | |
| ı | N | No. | | | | | | |
| i | | es. Fill in the details. | | | | | | |
| | _ | | | Governmental unit | Environmental law | if you know it | Date of notice | |
| 05 - | | | | | | | | |
| 25 ₽ | lave | you notified any governme | ental unit of | any release of hazardous material? | | | | |
|] [| ■ N □ Y | No. Yes. Fill in the details. | | | | | | |
| | | | | Governmental unit | Environmental law | if you know it | Date of notice | |

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| Debtor 1 | Tara | Nicole | Aiello | Case Number (if known) |
|----------|------------|-------------|-----------|---|
| | First Name | Middle Name | Last Name | , |

| 26 | Have you been a party in any judicial or adm | ninistrative proceeding under any enviro | nmental law? Include settlements and ord | ers. | | |
|----|--|--|--|--------------------|--|--|
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | Court or agency | Nature of the case | Status of the case | | |
| Pa | Give Details About Your Business or C | Connections to Any Business | | | | |
| 27 | Within 4 years before you filed for bankrupt | cy, did you own a business or have any o | of the following connections to any busine | ess? | | |
| | A sole proprietor or self-employed in | a trade, profession, or other activity, eitl | ner full-time or part-time | | | |
| | A member of a limited liability compa | any (LLC) or limited liability partnership (| LLP) | | | |
| | A partner in a partnership | | | | | |
| | An officer, director, or managing exe | cutive of a corporation | | | | |
| | An owner of at least 5% of the voting | or equity securities of a corporation | | | | |
| | No. None of the above applies. Go to Par | t 12. | | | | |
| | Yes. Check all that apply above and fill in | the details below for each business. | | | | |
| 28 | Within 2 years before you filed for bankrupt institutions, creditors, or other parties. | cy, did you give a financial statement to a | inyone about your business? Include all f | inancial | | |
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | Date issued | | | | |
| Pa | rt 12: Sign Below | | | | | |
| i | I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | ✗ /s/ Tara Nicole Aiello | x | | | | |
| | Signature of Debtor 1 | Signature of De | btor 2 | | | |
| | Date 05/17/2017 MM / DD / YYYY | DateMM / D | D / YYYY | | | |
| ı | Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | | | |
| | ■ No □ Yes | | | | | |
| | ∐ Yes | | | | | |
| ١ | Did you pay or agree to pay someone who is | not an attorney to help you fill out bankro | uptcy forms? | | | |
| | No | | | | | |
| | Yes. Name of person | | Attach the Bankruptcy Petition Preparer's Declaration, and Signature (0 | | | |
| | | | (| , | | |

| Fill in this i | Caso 17 | | ilod 05/10/17 | tered 05/19/17 10:27:0 6 of 60 | 08 Desc Main | |
|-------------------------------|---|--|---------------------------------------|---|---|-------|
| Debter 1 | Tara | Nicole | Aiello | 0 01 00 | | |
| Debtor 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Florida | All della Marca | LAN | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | s Bankruptcy Court for t | the : <u>NORTHERN</u> District of <u>IL</u> | . <u>LINOIS</u> (State) | | Check if this is an | |
| Case Numbe (If known) | er | | | | amended filing | |
| Official F | orm 108 | | | | • | |
| | | tion for Individual | s Filing Under Cl | hapter 7 | | 12/15 |
| If you are an in | ndividual filing unde | r chapter 7, you must fill out th | nis form if: | | | |
| | ve claims secured b | | d | | | |
| - | | erty and the lease has not expir ourt within 30 days after you file | | r by the date set for the meeting of ci | reditors, | |
| | | | | to the creditors and lessors you list. | • | |
| If two married | people are filing too | gether in a joint case, both are | equally responsible for supp | lying correct information. | | |
| | nust sign and date t | | | | | |
| • | e and accurate as p ne and case number | • | ed, attach a separate sheet to | this form. On the top of any addition | nal pages, | |
| | | Who Have Secured Claims | | | | |
| Part 1: | | | dita na 14/h a 11au a Olaima Oa | d by Duran and ACCF | N) 6:11 : 4b | |
| 1. For any cre information | = | ed in Part 1 of Schedule D: Cre | ditors Who Have Claims Sec | ured by Property (Official Form 106D |)), fill in the | |
| Identify the | creditor and the pr | operty that is collateral | What do you intend secures a debt? | d to do with the property that | Did you claim the property as exempt on Schedule C? | |
| Creditor's | 3 | | Surrender | the property | ☐ No | |
| name: | | | Retain the | property and redeem it | Yes | |
| Description | on of | | Retain the | property and enter into a | _ | |
| property | | | Reaffirmat | tion Agreement. | | |
| securing | debt: | | Retain the | property and [explain]: | _ | |
| Creditor's | <u> </u> | | Surrender | the property | | |
| name: | | | Retain the | property and redeem it | Yes | |
| Description | on of | | Retain the | property and enter into a | _ | |
| property | | | Reaffirmat | tion Agreement. | | |
| securing | debt: | | Retain the | property and [explain]: | _ | |
| | | | | | <u> </u> | |
| Creditor's | 3 | | = | the property | ☐ No | |
| name: | | | <u> </u> | property and redeem it | Yes | |
| Description | on of | | | property and enter into a | | |
| property | J-1.1. | | | tion Agreement. | | |
| securing | aebt: | | ☐ Retain the | property and [explain]: | | |
| One -1:4 - 1 | | | | the manager | <u> </u> | |
| Creditor's | j . | | ☐ Surrender | the property | □No | |

name:

property

Official Form 108

Description of

securing debt:

Record # 720027

 $\hfill\square$ Retain the property and redeem it

Retain the property and [explain]:

Reaffirmation Agreement.

Retain the property and enter into a

Yes

Page 1 of 2

Debtor 1

Tara

Case 17-81199

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First Name

| Part 2: List Your Unexpired Personal Property | Leases | | | | |
|---|---|----------------------------|--|--|--|
| For any unexpired personal property lease that yo | u listed in Schedule G: Executory Contracts and Unexpired Lea | ases (Official Form 106G), | | | |
| fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet | | | | | |
| ended. You may assume an unexpired personal pr | roperty lease if the trustee does not assume it. 11 U.S.C. § 365(p | 0)(2). | | | |
| Describe your unexpired personal property lea | ises | Will the lease be assumed? | | | |
| Lessor's name: H&H Mini Unit Storage | | □ No | | | |
| Description of leased property: | | Yes | | | |
| Lessor's name: | | □ No | | | |
| Description of leased property: | | Yes | | | |
| Lessor's name: | | □ No | | | |
| Description of leased property: | | ☐ Yes | | | |
| Lessor's name: | | □ No | | | |
| Description of leased property: | | ☐ Yes | | | |
| Lessor's name: | | □ No | | | |
| Description of leased property: | | Yes | | | |
| Lessor's name: | | □ No | | | |
| Description of leased property: | | ☐ Yes | | | |
| Lessor's name: | | □ No | | | |
| Description of leased property: | | Yes | | | |
| Part 3: Sign Below | | | | | |
| Under penalty of perjury, I declare that I have indica personal property that is subject to an unexpired le | ated my intention about any property of my estate that secures a ase. | a debt and any | | | |
| ★ /s/ Tara Nicole Aiello Signature of Debtor 1 | Signature of Debtor 2 | _ | | | |
| Date Dated: 05/17/2017 | Date | | | | |

MM / DD / YYYY

MM / DD / YYYY

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B2030 (Form 2030) (12/15)

Date

United States Bankruptcy Court

| | NORTHERN DISTR | act of illinois | WESTERN DIVISION | JN | |
|----|---|---|---|---|----------|
| [n | re | | | | |
| Га | ra Nicole Aiello / Debtor | | Case No: | | |
| | | | Chapter: | Chapter 7 | |
| | DISCLOSURE OF COM | MPENSATION OF AT | TTORNEY FOR DEE | BTOR | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b inpensation paid to me within one year before the filing of the dered or to be rendered on behalf of the debtor(s) in contemporary | o), I certify that I am the petition in bankrupto | e attorney for the abov cy, or agreed to be paid | e named debtor(s) I to me, for service | es |
| | For legal services, I have agreed to accept | \$1,200.00 | | | |
| | Prior to the filing of this statement I have received | \$1,675.00 | | | |
| | Balance Due | \$0.00 | | | |
| | Post Case-Filing Work Pre-Paid: | \$475.00 | | | |
| 2. | The source of the compensation paid to me was: | | | | |
| | Debtor(s) Other: (specify) Ken Ayres | s, Jr. | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | Debtor(s) Other: (specify) Ken Ayres, Jo | <u>r.</u> | | | |
| 4. | I have not agreed to share the above-disclosed comp of my law firm. | ensation with any othe | r person unless they ar | e members and ass | sociates |
| | I have agreed to share the above-disclosed compensation of my law firm. A copy of the agreement, together vattached. | _ | - | | |
| 5. | In return for the above-disclosed fee, I have agreed to rene case, including: | der legal service for all | aspects of the bankrup | otey | |
| | Analysis of the debtor's financial situation, and rend bankruptcy; | dering advice to the deb | otor in determining who | ether to file a petit | ion in |
| | b. Preparation and filing of any petition, schedules, stat | tements of affairs and p | olan which may be requ | uired; | |
| 6. | By agreement with the debtor(s), the above-disclosed fee Fee does NOT include any work done post-filing. | does not include the fo | ollowing service: | | |
| | | ERTIFICATION | | | |
| | I certify that the foregoing is a complete spayment to me for representation of the debte | | - | or | |
| | Date: 05/18/2017 | /s/ Jason Kyle Nielson | ı | | |

Page 1 of 1 Record # 720027

 $Signature\ of\ Attorney$

Geraci Law L.L.C. Name of law firm

Date: 5/5/2017

Headquarters: 55 E. Monroe Street, #3400 Chicago Lene03 PEEG 254707 CHENT CORNER WWW.INFOTAPES.COM

Consultation Attorney: JKN Record #: 720-027

Retainer Agreement Chapter 7 - Pre-filing

| Comina | a hafara filing in Occur. 1 | | | |
|--|--|---|---|---|
| dehit or | s before filing in Court: I retain G ly, a flat fee for services before filing | ieraci Law L.L.C. to prepare t | to file a Chapter 7 bankruptcy pet | ition in court. I agree to pay, by |
| at \$ { | y, a natice for services before filling | 11 COURT OF \$ | 2 4 41 4 | _ |
| and \${ | today, \$ {} will obtain from { | } her { | starting { | } |
| start pre | more than this amount to pre-pay paring your documents as soon as y is not included in the pre-filing amou | ou sign this contract. Work he | fore signing is no charge. Work a | |
| services voluntar | e file your Chapter 7 bankruptcy in 5.00 & \$335 = \$ 930.00 total after filing through Discharge or one of the control of the c | a nat lee. We will present y ase closing without discharg ci Law for post-bankruptcy se | ou with an agreement to repay the | e \$335, and pay a fee for our |
| attachme proceedir court , all including | fee for pre-filing work pays for: consist of financial affairs; phone calls, emails, nts, web uploads and mail; office appoing; taking calls from your creditors or bill work until case closing is included exto reopen, avoid judgment liens, for enlittending rule 2004 examinations; review | ntment to review and sign your collectors. If you decide to proceed missed section 341 meeting and contested | petition; filing your case in court. Exercises per pay, or pay for ALL services before tings; amendments to schedules; and matter including but not limited to a service production. | ited from you including faxes, email cluded: appearance in any court of re and after we file your case in versary proceedings; any motions |
| Advance client trus | With "flat fee", rather than hourly, you ke pay for our services billed hourly at \$7 Payment Retainer. Payments on flat for account. We will only refund unearned unds held in our trust account which ma | ee or hourly become our proper fees You may enter into a sec | ce a security retaier, which may cost | you more, or less than a flat fee. |
| above. V receiving unearned of the disp | ion. If you decide not to proceed, to this schedule, I agree that Geral will only refund fees not earned. We will only refund fees not earned. We written notice of the dispute. You may be advanced fees. If you dispute the amount to Geraci Law within 30 days of the e of the dispute from the client, we shall the of the dispute from the client, we shall the of the dispute from the client. | Visconsin: We will submit any uside a claim with the Wisconsin Let of the fee and want that disputed and the fee and want that disputed in the fee and want that disputed in the fee accounting of the accounting | and charge me for the work done inresolved dispute about the fee to bi awyers' Fund for Client Protection if the to be submitted to binding arbitration tre unable to resolve the dispute to the | to date at hourly rates shown nding arbitration within 30 days of the we fail to provide a refund of |
| circumsta property. Creditors of loans; edu after filing | ers: You agree: to fully cooperate with torney or staff will work on your file tonces: This flat fee is based on the facts file Chapter 13 if you have property not rothers may object to a chapter 7 discretional debts and tuition; most tax debt not a chapter to a chapter to a chapter will not transfer or acquire any property | you told us. If that changes, yo claimed as exempt, or risk turn tharge of certain debts or to any ts; undisclosed debts; maintenatin your green folder as usually re | entire Geraci Law Team, unlike single ur fee may change. Exemption law over "non-exempt" property to a Trus discharge, for a variety of reasons. nce or support; fines; fraud, stealing not discharged. No discharge if your | e attorney "law firms". Change in is only protect a limited amount of tee. No guarantee of Discharge: Debts not discharged: student or intentional injury claims, debts |
| Date: S | in x Taia A | | X | |
| | Tara Aiello (Debtor) | | (Joint Debtor) | |
| x | 1-Day | Attorney for the Debtor(s), Re | epresenting Geraci Law L.L.C. | rev 161112 |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re

| Tara Nicole Aiello / Debtor | Bankruptcy Docket #: |
|-----------------------------|----------------------|
| | Judae: |

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 05/17/2017 /s/ Tara Nicole Aiello

Tara Nicole Aiello

X Date & Sign

Record # 720027 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Desc Main

B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 720027 Page 1 of 2 Record #

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Form B 201A, Notice to Consumer Debtor(s)

In re Tara Nicole Aiello / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 05/17/2017 | /s/ Tara Nicole Aiello | | |
|-------------------|------------------------------|---|--|
| | Tara Nicole Aiello | | |
| Dated: 05/18/2017 | /s/ Jason Kyle Nielson | | |
| | Attorney: Jason Kyle Nielson | _ | |

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| De | otor i lala | Nicole | Aiello | Case Numb | er (if known) | |
|------|--|--|--|--|---|---|
| | First Name | Middle Name | Last Name | Cobb Numb | ei (ii kilowii) | |
| F | art 6: Answer These Question | ne for Deporture D | | | | |
| | THE SECTION OF THE SE | ns for keporting Purp | Hoses | | | |
| 16. | What kind of debts do you have? | No. G | Go to line 16b. Go to line 17. The debts primarily busing a business or investment to to line 16c. Go to line 17. | sumer debts? Consumer debts are arily for a personal, family, or househorily for a personal, family, or househoris are debts? Business debts are don't or through the operation of the business are not consumer debts or business | old purpose." ebts that you incurred to obtain iness or investment. | |
| 17. | Are you filing under | | | | | |
| | Chapter 7? | ∐No. Iam | not filing under Chapter | 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | o. | Do you estimate that after any exemp paid that funds will be available to dis | t property is excluded and tribute to unsecured creditors? | |
| 18. | How many creditors do | 1-49 | | ☐ 1,000-5,000 | D 25 004 50 000 | |
| | you estimate that you | 50-99 | | ☐ 5,001-10,000 | ☐ 25,001-50,000 ☐ 50,004,400,000 | |
| | owe? | 1 00-199 | | ☐ 10,001-25,000 | ☐ 50,001-100,000 ☐ More than 100,000 | |
| | | 200-999 | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | More than 100,000 | |
| 19. | How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$10 \$100,001-\$: | 00,000 500,000 | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion | |
| 20. | How much do you | \$0-\$50,000 | | | ☐More than \$50 billion | ********** |
| | estimate your liabilities | \$50,001-\$10 | | □ \$1,000,001-\$10 million | □\$500,000,001-\$1 billion | |
| | to be? | \$100,001-\$5 | | \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion | |
| | | \$500,001-\$1 | | ☐ \$50,000,001-\$100 million | ☐ \$10,000,000,001-\$50 billion | |
| Dov | 7. | 4000,001 ψ 1 | 711111O11 | ☐ \$100,000,001-\$500 million | ☐ More than \$50 billion | |
| Part | A Sign Below | | | | | |
| or y | ou | If I have chosen to | file under Chapter 7. I a | e under penalty of perjury that the info m aware that I may proceed, if eligib d the relief available under each chap | | |
| | | If no attorney repre this document, I ha | esents me and I did not p eve obtained and read the | ay or agree to pay someone who is a notice required by 11 U.S.C. § 342 | not an attorney to help me fill out (b). | *************************************** |
| | | I request relief in a | ccordance with the chapt | ter of title 11, United States Code, sp | ecified in this netition | , management |
| | | I understand makin with a bankruptcy of | g a false statement, con- asse can result in fines up 1341, 1519, and 3571. | cealing property, or obtaining money p to \$250,000, or imprisonment for up | | *************************************** |
| | | Executed on | : 5 / 1 12017 | _ | | *************************************** |
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| Fill in this in | | D | ocument Pa | ge 54 of 60 | |
|---------------------|----------------------------|---------------------------|---------------------------------------|---|------|
| THE HELDING HE | formation to identify y | your case: | | | |
| Debtor 1 | Tara | Nicole | Aiello | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States F | Bankruptcy Court for the : | NORTHERN District of | f <u>ILLINOIS</u> | · | |
| Case Number | | | (State) | 1 | |
| (If known) | <u> </u> | | | Check if this is an | |
| | | | | amended filing | |
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| Official Fo | <u>rm 106 Dec</u> | | | | |
| | | | | | |
| Declarati | on About a | n individual [| Debtor's Sched | fules | |
| | | | | | 2/15 |
| I two memor po | opie are ming togetin | er, both are equally resp | onsible for supplying corr | ect information. | |
| You must file this | s form whenever you | file bankruptcy schedul | es or amended schedules. | Making a false statement, concealing property, or | |
| · | a. b. shorth my made | an countection with a par | nkruptcy case can result in | making a faise statement, concealing property, or a fines up to \$250,000, or imprisonment for up to 20 | |
| ears, or both. 18 | 3 U.S.C. §§ 152, 1341, | 1519, and 3571. | | - misse of the second of missing mineric for the to to | |
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| | in Below | | | | |
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| Did you pay o | | ne who is NOT an attorn | ley to help you fill out ban | kruptev forms? | |
| _ | | ne who is NOT an attorn | ney to help you fill out ban | kruptcy forms? | |
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| No | r agree to pay someo | | ney to help you fill out ban | kruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| No | r agree to pay someo | | ney to help you fill out ban | Attach Bankruptcy Petition Preparer's Notice, Declaration, and | |
| No | r agree to pay someo | | ney to help you fill out ban | Attach Bankruptcy Petition Preparer's Notice, Declaration, and | |
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| Mo No Na⊔ | r agree to pay someon | | · · · · · · · · · · · · · · · · · · · | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| No Yes. Nat | r agree to pay someon | | · · · · · · · · · · · · · · · · · · · | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
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| No Yes. Nat | r agree to pay someon | | · · · · · · · · · · · · · · · · · · · | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |

Signature of Debtor 2

Date MM / DD / YYYY

MM / DD / YYYY

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Aiello

| Debtor 1 | <u>I ara</u> | Nicole | Aiello | Case Number (if known) |
|--|--|--|--|--|
| Table State Control of the Control o | First Name | Middle Name | Last Name | |
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| ²⁶ Hav | e you been a party | in any judicial or administra | tive proceeding under any enviro | nmental law? Include settlements and orders. |
| = | No. | | | |
| | Yes. Fill in the detai | ils. | | |
| | | Court | of agency | Nature of the case. Status of the case. |
| Part 11 | Give Details Ab | out Your Business or Connecti | one to Any Business | The state of the s |
| | | ······································ | | |
| 27 WILL | nin 4 years before y | ou filed for bankruptcy, did | you own a business or have any | of the following connections to any business? |
| | A mamber of a li | or or sen-employed in a trade | , profession, or other activity, eit C) or limited liability partnership (| her full-time or part-time |
| | A partner in a pa | artnershin |) or simited liability partnership (| LLP) |
| | | tor, or managing executive o | of a composition | |
| | | | ty securities of a corporation | |
| | | | -3 acontines of 5 corporation | |
| | | ve applies. Go to Part 12. | | |
| L, | res. Check all that a | apply above and fill in the deta | ils below for each business. | _ |
| 28 With | in 2 was bafa | | | |
| insti | tutions, creditors, c | ou filed for bankruptcy, did y or other parties. | ou give a financial statement to a | myone about your business? Include all financial |
| 1 | No. | | | |
| | es. Fill in the details | s. | | |
| | | Date Inst | ed | |
| Part 12: | Sign Below | | and the state of t | |
| l leave- | | | | |
| answe | read the answers o ers are true and con | on this Statement of Financia rect. I understand that makin | l Affairs and any attachments, ar | d I declare under penalty of perjury that the roperty, or obtaining money or property by fraud |
| III CON | nection with a balli | Kruptcy case can result in tin | es up to \$250,000, or imprisonme | int for up to 20 years, or both. |
| 18 U.S | 5.0 §§ 152, 1341, 15 | 519, and 3571. | | |
| | | | | |
| X | 1 avail | | × | |
| 8 | Signature of Debtor 1 | | Signature of Del | otor 2 |
| | 5 n | | | |
| | Date /// | 2017 | Date | · |
| | MM / DD / Y | 7 7 7 7 | MM / DE |) / YYYY |
| Did vo | u attach additional | name to Vous Statement of | Einemaint Affaire for to the training | |
| _ | | pages to rour statement or | rinanciai Aπairs for Individuals F | iling for Bankruptcy (Official Form 107)? |
| No. | | | | ************************************** |
| Ye | S | | | PA CONTRACTOR OF THE CONTRACTO |
| Did you | u pay or agree to pa | ay someone who is not an at | torney to help you fill out bankru | ptcy forms? |
| No | | | | • |
| _ | s. Name of person | | | |
| ∟ ^{16:} | e. Hame of person | W | • | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | | | one organizate (Official Form 115). |

Debtor 1 Tara

Nicole

Case 17-81199 Doc 1 Filed 05/19/17 Entered 05/19/17 10:27:08 Desc Main Document Page 56 of 60 Debtor 1 Nicole Case Number (if known) List Your Unexpired Personal Property Leases Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: H&H Mini Unit Storage ☐ No Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 2 Date Dated: 5/1/20

MM / DD / YYYY

MM / DD / YYYY

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DISCLAIMER Debtors have Feat and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FiCA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filling or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ. CHECK & MAKE SUBSCIENT TO US ACCURATED.

| Dated: 5 / 1 /2017 | Oua A | X Date & Sign |
|--------------------|--------------------|---------------|
| | Tara Nicole Aiello | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re
Tara Nicole Aiello / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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| Debtor 1 | Tara | Nicole | Aiello | Case Number (if known) | |
|-----------------|---|---|--|---|--|
| | First Name | Middle Name | Last Name | | —————————————————————————————————————— |
| | | | | Debtor 1 Del | umn B ster 2 or r-filing spouse |
| | ployment compen | | | \$0.00 | \$0.00 |
| Do no under | t enter the amount the Social Security | if you contend that the amount re Act. Instead, list it here: | ceived was a benefit | | |
| | | | | | |
| For y | our spouse | | | | |
| | | | | | |
| 9. Pens bene | i on or retirement ir it under the Social : | rcome. Do not include any amou Security Act. | nt received that was a | \$0.00 | \$0.00 |
| as a v | it include any benet victim of a war crime | purces not listed above. Specify fits received under the Social Set e, a crime against humanity, or in st other sources on a separate pa | curity Act or payments received ternational or domestic | | |
| 10a | | | | \$0.00 | 0.00 |
| 10b | | | | \$ 0.00 | \$0.00 |
| 10c. T | otal amounts from | separate pages, if any. | | \$0.00 | \$0.00 |
| 11. Calcu | late your total cur | rent monthly income. Add lines : al for Column A to the total for Co | 2 through 10 for each | \$1,728.12 + | \$0.00 = \$1,728,12 |
| Colum | ii. Then add the lot | al for Column A to the total for Co | olumn B. | T172012 | 70.00 - 71,720.12 |
| - | - | | | | |
| Part 2: | | ether the Means Test Applies to Y | | | |
| 12. Calcu | late your current n | nonthly income for the year. Fol | low these steps: | | 3000 |
| 128. | | | l <u></u> | Copy line 11 here | ^{12a.} \$1,728.12 |
| | | number of months in a year). | | | x 12 |
| | | innual income for this part of the | | | ^{12b.} \$20,737.44 |
| 3. Calcu | late the median far | nlly income that applies to you. | Follow these steps: | | |
| Fill in | the state in which ye | ou live. | IL | | |
| Fill in | the number of peop | le in your household. | | | |
| | | | 3 | | |
| Fill in | the median family in | ncome for your state and size of h | householdline using the link specified in the s | | 13. \$76,406.00 |
| instruc | tions for this form. | This list may also be available at | the bankruptcy clerk's office. | eparate | |
| 4 How d | o the lines compa | | | | |
| _ | the lines compar | | | | |
| 14a. [| Go to Part 3. | ian or equal to line 13. On the to | p of page 1, check box 1, There is | no presumption of abuse. | |
| 14b. [| Line 12b is more | than line 13. On the top of page fill out Form 122A-2. | I, check box 2, The presumption o | of abuse is determined by Form 122A-2. | |
| Part 3: | Sign Below | | | | |
| i | By signi ng here, I d | eclare under penalty of perjury th | at the information on this statemer | nt and in any attachments is true and con | ect. |
| | 400 | Tara Nicole Aiello | | | |
| | Date:: <u>5</u> | //2017 | | | |
| i | f you checked line | 14a, do NOT fill out or file Form 1 | 22A-2. | | |
| I | f you checked line | 14b, fill out Form 122A-2 and file | it with this form. | | |

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Form B 201A, Notice to Consumer Debtor(s)

In re Tara Nicole Aiello / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated. deny your

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Tara Nicole Aiello

X Date & Sign

Attorney: Jason Kyle Nielson